

are not unjustly enriched as a result of abusive financial arrangements (such as owner lease-backs) with developmentally disabled clients; and

(d) Providers of community supported living arrangements services, or the relatives of such providers, are not named beneficiaries of life insurance policies purchased by or on behalf of developmentally disabled clients.

PART 442—STANDARDS FOR PAYMENT TO NURSING FACILITIES AND INTERMEDIATE CARE FACILITIES FOR THE MENTALLY RETARDED

Subpart A—General Provisions

Sec.

442.1 Basis and purpose.

442.2 Terms.

Subpart B—Provider Agreements

442.10 State plan requirement.

442.12 Provider agreement: General requirements.

442.13 Effective date of provider agreement.

442.14 Effect of change of ownership.

442.15 Duration of agreement for ICFs/MR.

442.16 Extension of agreement for ICFs/MR.

442.30 Agreement as evidence of certification.

442.40 Availability of FFP during appeals for ICFs/MR.

442.42 FFP under a retroactive provider agreement following appeal.

Subpart C—Certification of ICFs/MR

442.100 State plan requirements.

442.101 Obtaining certification.

442.105 Certification of ICFs/MR with deficiencies: General provisions.

442.109 Certification period for ICFs/MR: General provisions.

442.110 Certification period for ICFs/MR with standard-level deficiencies.

442.117 Termination of certification for ICFs/MR whose deficiencies pose immediate jeopardy.

442.118 Denial of payments for new admissions to an ICF/MR.

442.119 Duration of denial of payments and subsequent termination of an ICF/MR.

Subparts D–F [Reserved]

AUTHORITY: Sec. 1102 of the Social Security Act (42 U.S.C. 1302), unless otherwise noted.

SOURCE: 43 FR 45233, Sept. 29, 1978, unless otherwise noted.

Subpart A—General Provisions

§ 442.1 Basis and purpose.

(a) This part states requirements for provider agreements for facility certification relating to the provision of services furnished by nursing facilities and intermediate care facilities for the mentally retarded. This part is based on the following sections of the Act:

Section 1902(a)(4), administrative methods for proper and efficient operation of the State plan;

Section 1902(a)(27), provider agreements;

Section 1902(a)(28), nursing facility standards;

Section 1902(a)(33)(B), State survey agency functions; Section 1902(i), circumstances and procedures for denial of payment and termination of provider agreements in certain cases;

Section 1905(c), definition of nursing facility; Section 1905(d), definition of intermediate care facility for the mentally retarded;

Section 1905 (f), definition of nursing facility services;

Section 1910, certification and approval of ICFs/MR and of RHCs;

Section 1913, hospital providers of nursing facility services;

Section 1919 (g) and (h), survey, certification and enforcement of nursing facilities; and

Section 1922, correction and reduction plans for intermediate care facilities for the mentally retarded.

(b) Section 431.610 of this subchapter contains requirements for designating the State licensing agency to survey these facilities and for certain survey agency responsibilities.

[43 FR 45233, Sept. 29, 1978, as amended at 47 FR 31533, July 20, 1982; 59 FR 56235, Nov. 10, 1994]

§ 442.2 Terms.

In this part—

Facility refers to a nursing facility, and an intermediate care facility for the mentally retarded or persons with related conditions (ICF/MR).

Facility, and any specific type of facility referred to, may include a distinct part of a facility as specified in § 440.40 or § 440.150 of this subchapter.

Immediate jeopardy means a situation in which immediate corrective action is necessary because the provider's noncompliance with one or more requirements of participation or conditions of participation has caused, or is